

Work Order ID 88762

August 02-12 7:52:26 AM

88762

PRELIMINARY ISSUE

Page 1

Item ID: D4634-3
Revision ID: PRELIM
Item Name: Middle Ceiling Panel, Center

Accept

N900040100

Setup Start *NS1*

Stop *NS2*

Start Date: 02/08/2012 Start Qty: 1.00 *1*
Required Date: 16/08/2012 Req'd Qty: 1.00 *1*

Cust Item ID:

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 12/08/02 Tooling: _____ Date: _____
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D4634	PB2								
100		0.00							
100	HAND FINISHING THERMOFORMING								
Thermoform		0.00				x1			<u>Sh</u> <u>12/08/07</u>
Thermoforming Machine	Memo Cut Blanks								
105		0.00							
105	Dry Material								
HandThermo		0.00				x1			<u>Sh</u> <u>12/08/07</u>
Hand Finishing Thermoforming	Memo Dry Sheet as per QSI022 KYDEX								
	Temp: <u>150° F</u>								
	Time IN: <u>2:00 pm 12/08/06</u>								
	Time OUT: <u>2:00 am 12/08/07</u>								

no hole

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

88762

Page 2

Accept

N900040100

Setup Start *NS1*

Stop *NS2*

Cust Item ID:

Start Date: 02/08/2012 **Start Qty:** 1.00

*** 1 ***

Customer:

Required Date: 16/08/2012 **Req'd Qty:** 1.00

*** 1 ***

Reference:

Run Start *NR1*

Approvals:

Process Plan:

Date:

Tooling:

Date:

Stop *NR2*

QC:

Date:

SPC (Y/N):

Date:

[illegible]

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

88762

Page 3

N900040100

Setup Start *NS1*

Stop *NS2*

Cust Item ID:

Customer:

Run Start *NR1*

Stop *NR2*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

[illegible]

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 88762

August-02-12 7:52:26 AM

88762

Page 4

Item ID: D4634-3

Accept

N900040100Setup Start ***NS1***

Revision ID: PRELIM

Item Name: Middle Ceiling Panel, Center

Stop ***NS2***

Start Date: 02/08/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 16/08/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run Start ***NR1***

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

170

QC21- Final Inspection - Work Order Release

0.00

170

QC

Memo

0.00

Quality Control

R1208-9
released

POSITIVE RECALL

EFFECTIVE 12/08/02 AUTH lu

RELEASED _____ DATE _____

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Picklist Print

August-02-12 7:52:30 AM

Page 1

Work Order ID: 88762

88762

Parent Item: D4634-3

D4634-3

Parent Item Name: Middle Ceiling Panel, Center

Start Date: 02/08/2012

Required Date: 16/08/2012

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev. A New Issue 12/05/07 DL

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MKYD6185S.080-P3-62015		Purchased	No			100	sf	1,495.838	14.97	16.63333			

MKYD6185S 080-P3-62015

6185 KYDEX .080"

**

Location

therm

116576

121755

Loc Qty

1495.838377

386.505377

1109.333

Loc Code

16.64.59 sf.

12/08/00

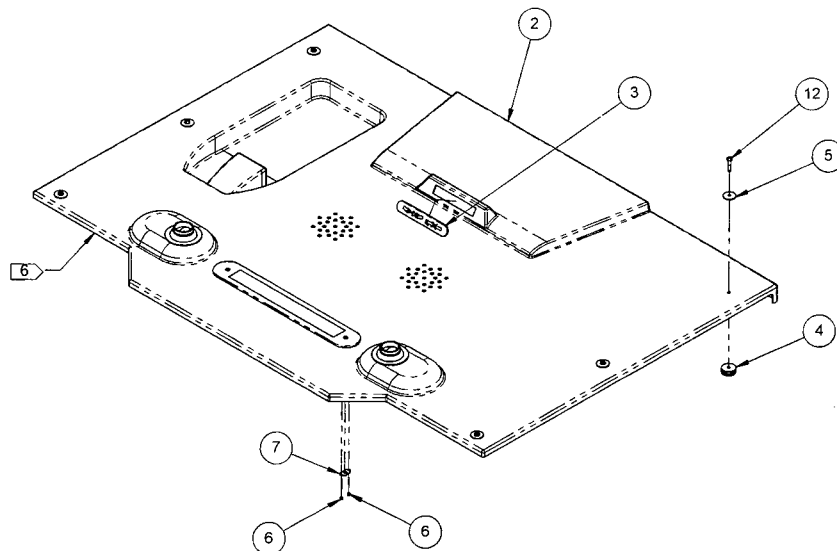
NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	



D4634-041 FWD, CENTER CEILING PANEL ASSY

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.4, ON SMOOTH SIDE
- 7) WEIGHT: 7.40 lbs

ITEM NO.	QTY. -041	PART NUMBER	DESCRIPTION
1	X	D4634-041	FWD, CENTER CEILING PANEL ASSY
2	1	D4634-1	FWD, CENTER CEILING PANEL
3	1	D4645-1	NO SMOKING & FASTEN BELT SYMBOLS
4	6	D4664-041	SPACER ASSEMBLY
5	6	AN970-3	WASHER
6	4	MS20426AD3-3	RIVET
7	2	MS21059L3	ANCHOR NUT
8	1	D4638-1	LED LIGHT
9	2	D4652-1	AIR VALVE, 1.16 ID DISK TYPE
10	2	D4646-1	PLENUM CAP ASSEMBLY
11	1	D4694-1	CHANNEL
12	6	MS27039-1-15	SCREW
13	2	MS24694-S5	SCREW

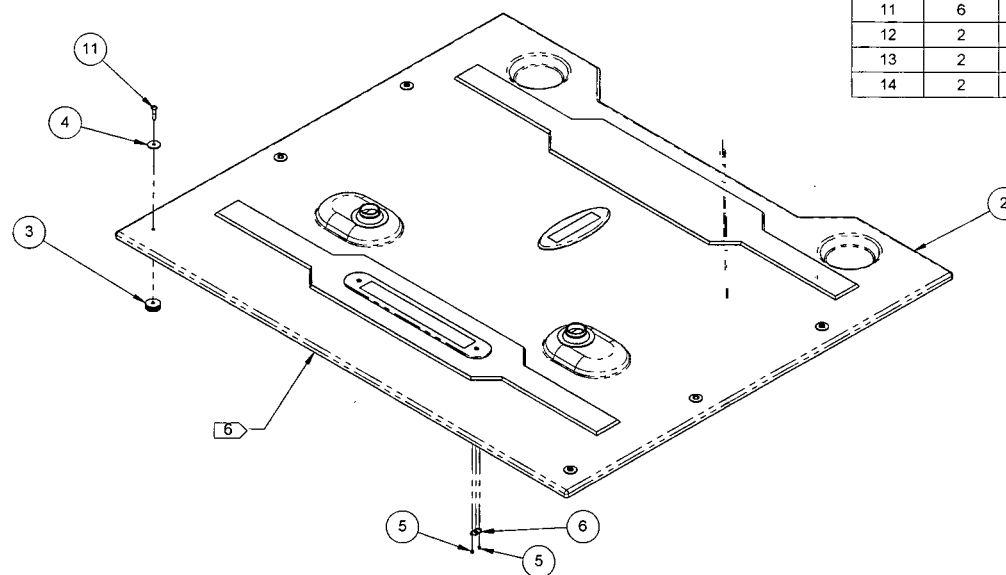
SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 88762 MLJ
12/08/02

PRELIMINARY ISSUE

12.07.25

PB2	MOLD STIFFENER REMOVE ON D4634-1; MOVE ON D4634-3	RF	12.07.25
A	NEW ISSUE	RF	12.04.04
REV.	DESCRIPTION	BY	DATE
DESIGN	RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	<input checked="" type="checkbox"/>	DRAWING NO.	REV. PB2
MFG. APPR.		D4634	SHEET 1 OF 11
APPROVED		TITLE	SCALE
DE APPR.		CENTER CEILING PANELS	NTS
DATE	12.07.25	COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

ITEM NO.	QTY. -043	PART NUMBER	DESCRIPTION
1	X	D4634-043	MIDDLE, CENTER CEILING PANEL ASSY
2	1	D4634-3	MIDDLE, CENTER CEILING PANEL
3	6	D4664-041	SPACER ASSEMBLY
4	6	AN970-3	WASHER
5	4	MS20426AD3-3	RIVET
6	2	MS21059L3	ANCHOR NUT
7	1	D4694-3	CHANNEL
8	1	D4694-5	CHANNEL
9	1	D4701-1	EMERGENCY LED LIGHT
10	1	D4638-1	LED LIGHT
11	6	MS27039-1-15	SCREW
12	2	MS24694-S5	SCREW
13	2	D4652-1	AIR VALVE, 1.16 ID DISK TYPE
14	2	D4646-1	PLENUM CAP ASSEMBLY



D4634-043 MIDDLE, CENTER CEILING PANEL ASSY

PRELIMINARY ISSUE

RF 12.07.25

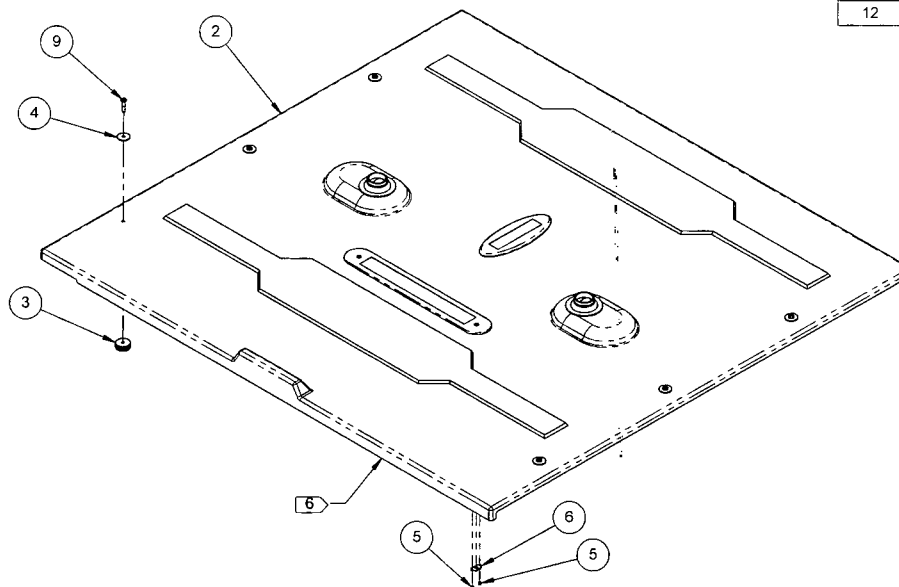
NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.4, ON SMOOTH SIDE
- 7) WEIGHT: 8.89 lbs

DESIGN	RF	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>RF</i>	DRAWING NO.	REV. PB2
MFG. APPR.		D4634	SHEET 2 OF 11
APPROVED		TITLE	SCALE
DE APPR.		CENTER CEILING PANELS	NTS
DATE	12.07.25	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

88762

ITEM NO.	QTY. -045	PART NUMBER	DESCRIPTION
1	X	D4434-045	AFT, CENTER CEILING PANEL ASSY
2	1	D4634-5	AFT, CENTER CEILING PANEL
3	6	D4664-041	SPACER ASSEMBLY
4	6	AN970-3	WASHER
5	4	MS20426AD3-3	RIVET
6	2	MS21059L3	ANCHOR NUT
7	1	D4701-1	EMERGENCY LED LIGHT
8	1	D4638-1	LED LIGHT
9	6	MS27039-1-15	SCREW
10	2	MS24694-S5	SCREW
11	2	D4646-1	PLENUM CAP ASSEMBLY
12	2	D4652-1	AIR VALVE, 1.16 ID DISK TYPE



D4634-045 AFT, CENTER CEILING PANEL ASSY

PRELIMINARY ISSUE

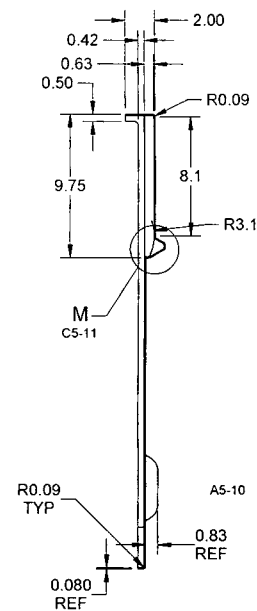
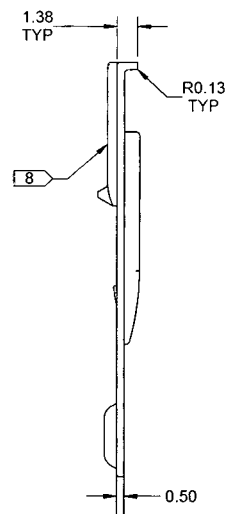
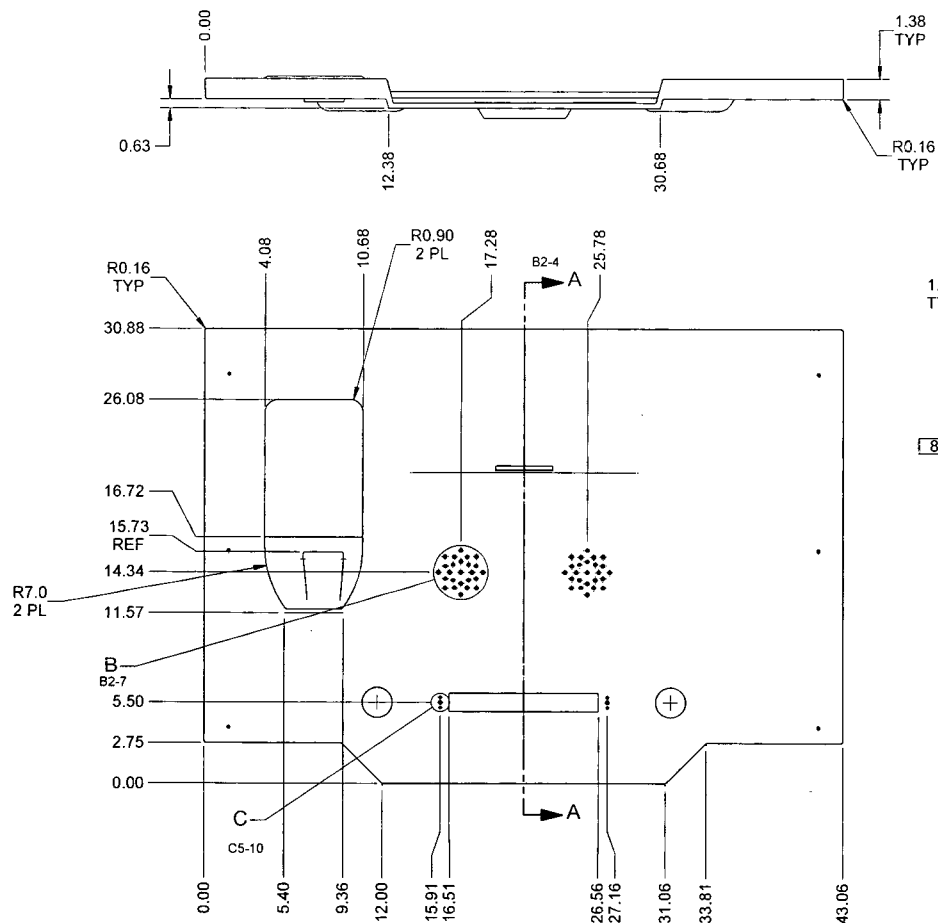
RF 12.07.25

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.4, ON SMOOTH SIDE
- 7) WEIGHT: 8.19 lbs

DESIGN	RF	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>RF</i>	DRAWING NO.	REV. PB2
MFG. APPR.		D4634	SHEET 3 OF 11
APPROVED		TITLE	SCALE
DE APPR.		CENTER CEILING PANELS	NTS
DATE	12.07.25	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

88762



28762

SECTION A-A C6-4

PRELIMINARY ISSUE

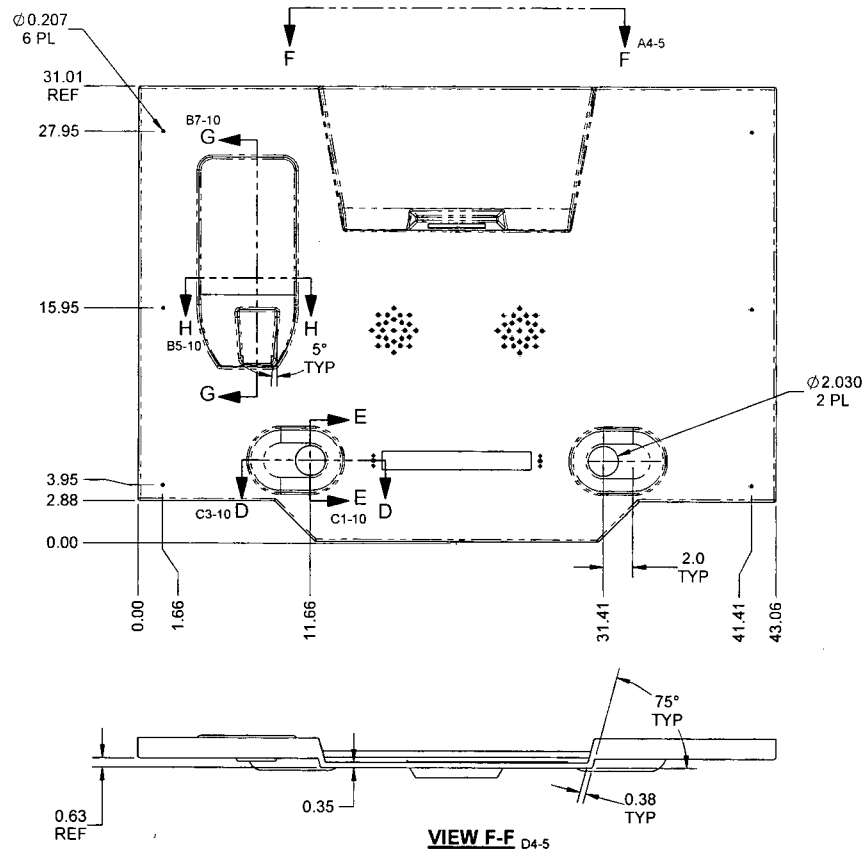
12.07.25

NOTES:

- 1) MATERIAL: KYDEX 6185 SHEET, 0.080 THICK,
P3-VELOUR MATTE, IVORY #62015
PER DART SPEC MKYD6185S.080-P3-62015
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 5.58 lbs
- 8) TEXTURE ON THIS SIDE
- 9) 0.14 RADIUS NOT SHOWN FOR CLARITY

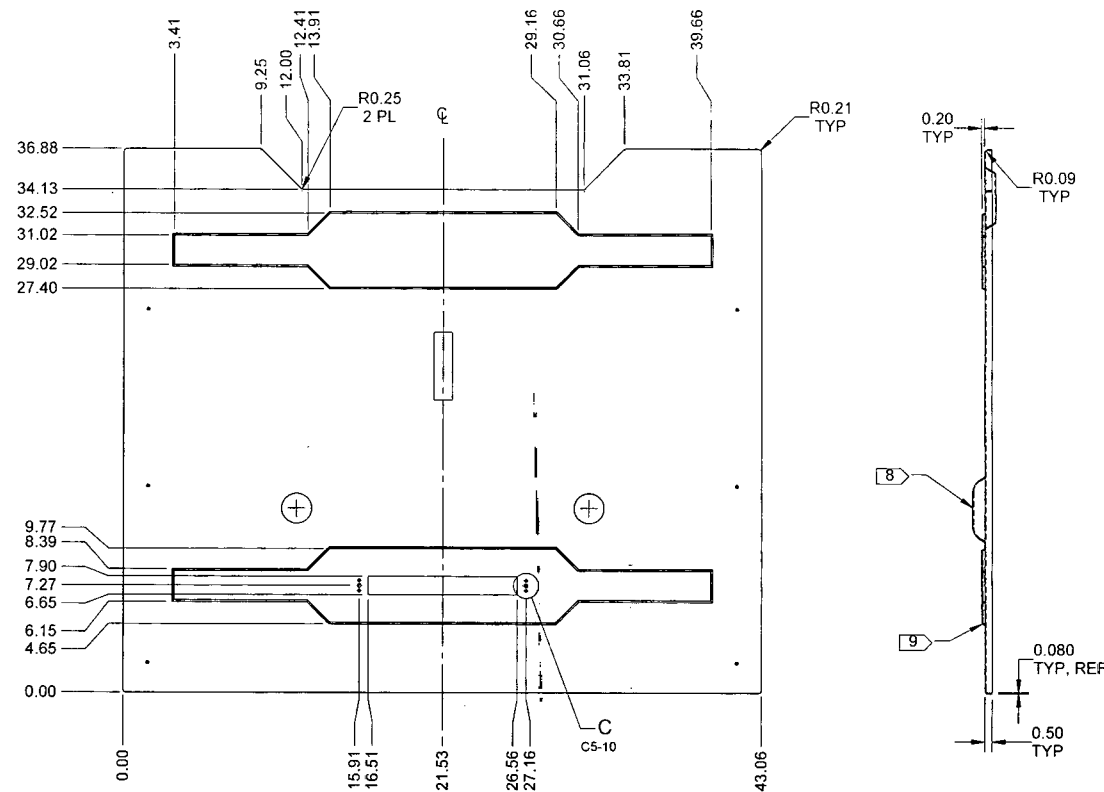
D4634-1 FWD, CENTER CEILING PANEL

DESIGN	RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED		DRAWING NO.	REV. PB2
MFG. APPR.		D4634	SHEET 4 OF 11
APPROVED		TITLE	SCALE
DE APPR.		CENTER CEILING PANELS	NTS
DATE	12.07.25	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	



D4634-1 FWD. CENTER CEILING PANEL
AUXILIARY VIEW

DESIGN	RF	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>[Signature]</i>	DRAWING NO.	REV. PB2
MFG. APPR.		D4634	SHEET 5 OF 11
APPROVED		TITLE	SCALE
DE APPR.		CENTER CEILING PANELS	NTS
DATE	12.07.25	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	



88762

D4634-3 MIDDLE, CENTER CEILING PANEL

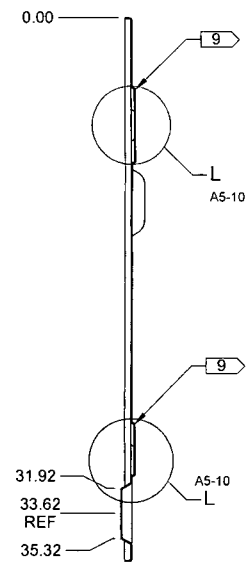
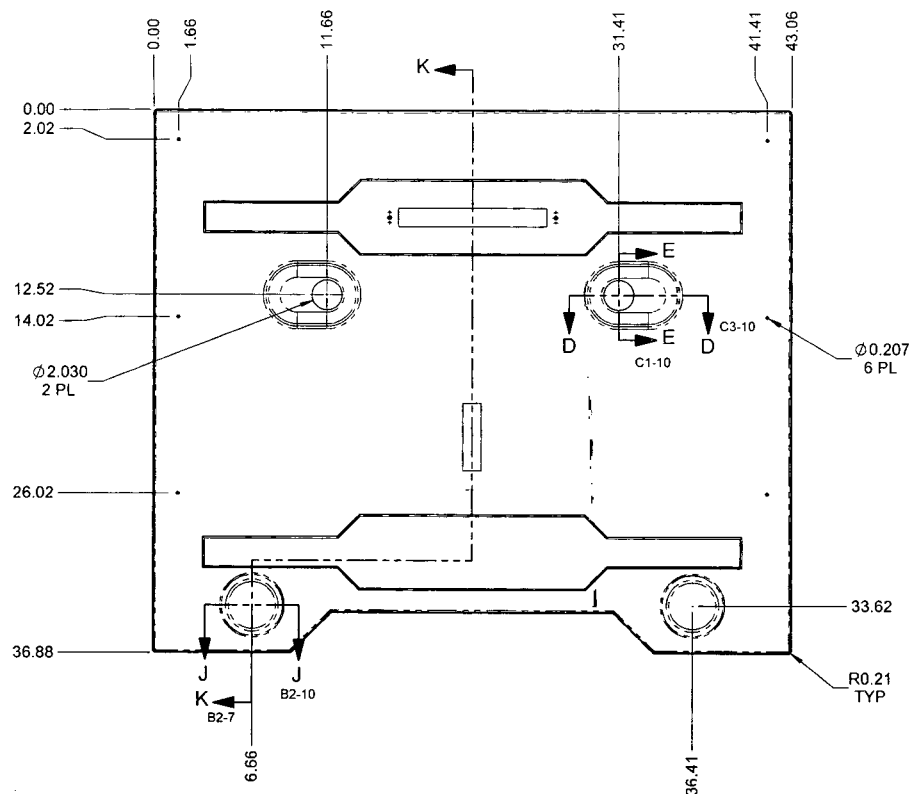
PRELIMINARY ISSUE

12.07.25

NOTES:

- 1) MATERIAL: KYDEX 6185 SHEET, 0.080 THICK,
P3-VELOUR MATTE, IVORY #62015
PER DART SPEC MKYD6185S.080-P3-62015
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 6.30 lbs
- 8) TEXTURE ON THIS SIDE
- 9) 0.14 RADIUS NOT SHOWN FOR CLARITY

DESIGN	RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	<i>[Signature]</i>	DRAWING NO.	REV. PB2
MFG APPR.		D4634	SHEET 6 OF 11
APPROVED		TITLE	SCALE
DE APPR.		CENTER CEILING PANELS	NTS
DATE	12.07.25	COPYRIGHT © 2012 BY DART AEROSPACE LTD <small>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	



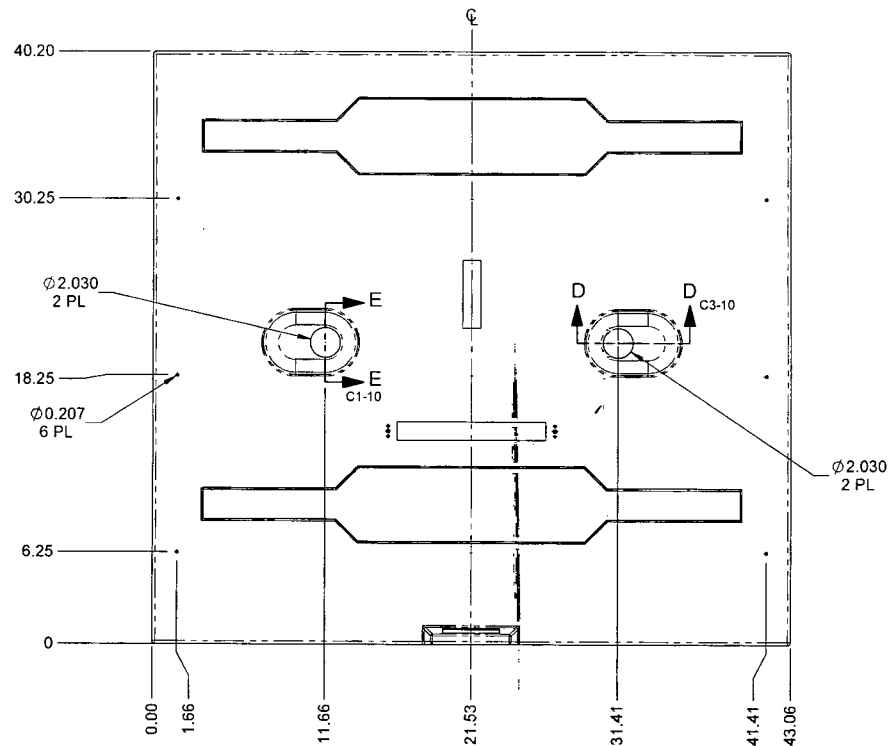
28762

D4634-3 MIDDLE, CENTER CEILING PANEL
AUXILIARY VIEW

PRELIMINARY ISSUE

12.07.25

DESIGN	RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	<i>[Signature]</i>	DRAWING NO.	REV. PB2
MFG. APPR.		D4634	SHEET 7 OF 11
APPROVED		TITLE	SCALE
DE APPR.		CENTER CEILING PANELS	NTS
DATE	12.07.25	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD</small>	

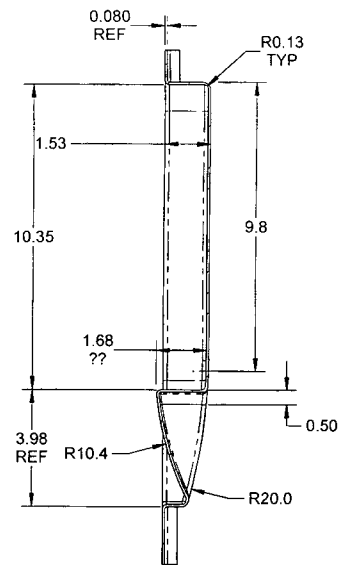


D4634-5 AFT, CENTER CEILING PANEL
AUXILIARY VIEW

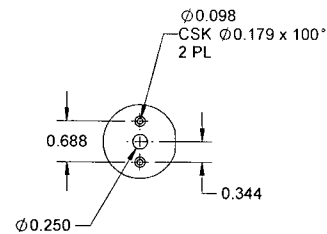
PRELIMINARY ISSUE

[Signature] 12.07.25

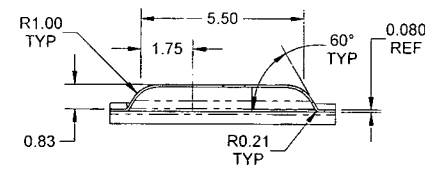
DESIGN	RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	<i>[Signature]</i>	DRAWING NO.	REV. PB2
MFG. APPR.		D4634	SHEET 9 OF 11
APPROVED		TITLE	SCALE
DE APPR.		CENTER CEILING PANELS	NTS
DATE	12.07.25	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	



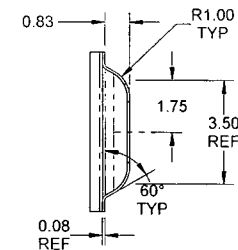
SECTION G-G
SCALE 4X C5-5



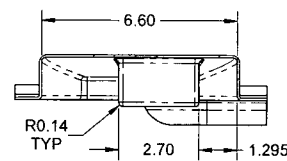
DETAIL C
SCALE 4X B7-4
B4-6
B4-8



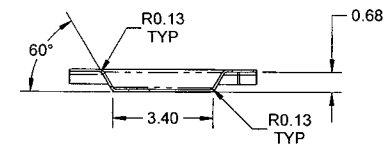
SECTION D-D
SCALE 2X B6-5
C4-7
C4-9



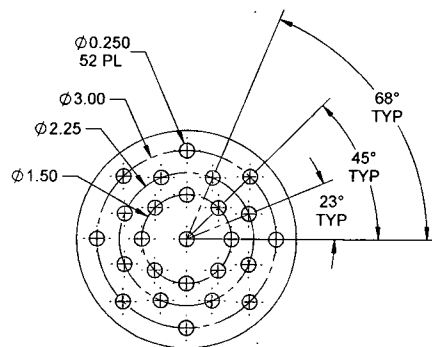
SECTION E-E
SCALE 4X B5-5
C4-7
C5-9



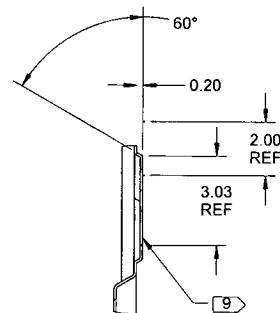
SECTION H-H
SCALE 2X C5-5



SECTION J-J
SCALE 2X B6-7



DETAIL B
SCALE 4X B7-4
2 PL

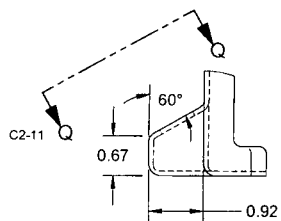


DETAIL L
SCALE 4X B2-7
C2-7
B2-8
C2-8
TYP

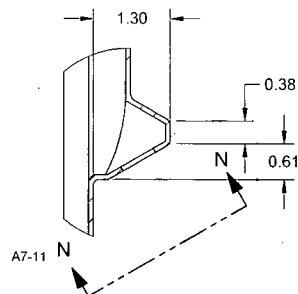
PRELIMINARY ISSUE

12.07.25

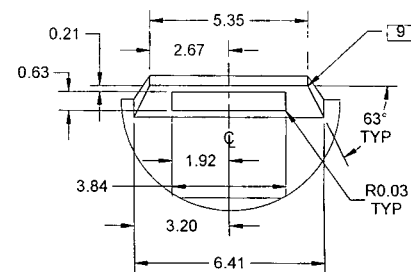
DESIGN	RF	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	<i>[Signature]</i>	DRAWING NO.	REV. PB2
MFG. APPR.		D4634	SHEET 10 OF 11
APPROVED		TITLE	SCALE
DE APPR.		CENTER CEILING PANELS	NTS
DATE	12.07.25	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	



DETAIL P
SCALE 2X B3-8

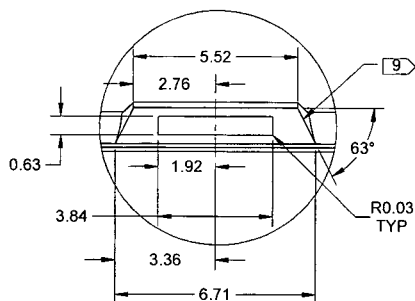


DETAIL M
SCALE 2X C3-4

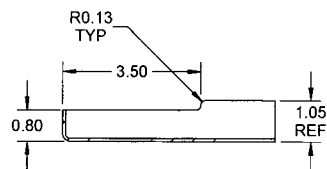


DETAIL Q
SCALE 0.5X D8-11

28762



DETAIL N
SCALE 0.5X C5-11



SECTION O-O
SCALE 1.3X B6-8

PRELIMINARY ISSUE

12.07.25

DESIGN	RF	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>[Signature]</i>	DRAWING NO.	REV. PB2
MFG. APPR.		D4634	SHEET 11 OF 11
APPROVED		TITLE	SCALE
DE APPR.		CENTER CEILING PANELS	INTS
DATE	12.07.25	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

DART AEROSPACE LTD	Work Order: 58762
Description: 139 Ceiling Panel CC.	Part Number: D4634-3
Inspection Dwg: D4634 Rev: PB2	Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

THERMOFORMING SECTION

Description	Accept	Reject	Method of Inspection	Comments
Inside Radii less than <u>N/A</u> "				
Shape Definition	✓			
Texture Retention	✓			
Material imperfections such as bumps, cracks, voids, scratching	✓			

Measured by: DL Date: 12/08/08

TRIMMING SECTION

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
0.50"		0.508"	✓	---	Visual	

Measured by: DL Date: 12/08/08

Audited by: DAS 16 12/08/08 Date:

Preliminary Approval: 2-03 Date:

Rev	Date	Change	Revised by	Approved
B	10.04.14	Added preliminary approval	KJ	

10.04.14

Daryl Leger

From: Roberto Fuentes <rfuentes@dartaero.com>
Sent: Friday, August 03, 2012 12:53 PM
To: Daryl Leger
Subject: Regarding A139 panels

Hi Daryl,

We talking to Harvey the other day regarding A139 panels drawing, the drawing was done to get part/mold make up, now there are ok, we thinking eliminate few of those because much control by mold have a note say regarding about that and this makes easy for QC less dimension to check in the future. For most I need is trim dimensions and oval dimensions. Thinking about that, let me know if make sense to you?

Roberto

Receiving Report

Date:

12/01/15

Supplier:

SABIC

Packing Slip:

Yes ☒ No ☐

Invoice:

Yes ☐ No ☒

Receipt:

Cash ☐ Cr ☒

Batch No:

M121 758

Dart P/O:

16709

Release Note Attached:

Yes ☒ No ☐

N/A

Waybill Attached:

Yes ☐ No ☐

N/A

Shipment Complete:

Yes ☒ No ☐

N/A

QC6 Inspection

Yes ☒ No ☐

N/A

Work Order

67705/15

Discrepancies

Part Number	Description	Quantity Ordered	Quantity Received	Quantity Returned	Quantity Short	Comments

Initials of receiver (if shipment OK) Level 12

[Signature]

Production/Admin:

Date

Received/Costing

Initial

12/01/15
[Signature]

Location

*** SHIPPED ***

A/C 14.76

SABIC Polymershapes
1250 Old Innes Rd., Unit 519

Ottawa, Ontario K1B 5L3
PST 85637 2750 TR0001
PHONE: (613)745-7043 FAX: (613)745-4291

Page: 1

SOLD TO: DART AEROSPACE LTD

1270 ABERDEEN STREET
HAWKESBURY ON K6A 1K7
Canada

SHIP TO: DART AEROSPACE LTD

1270 ABERDEEN STREET
HAWKESBURY ON K6A 1K7
Canada
1-613-632-5200

Our Order No	Customer	GST License	PST License	Invoice Terms	Ordered	Shipped	Taken By	RDD
001101	DARAR	CHARGE GST	6112-5207	NET 30 DAYS	13.04.12		dixonw	11.05.12
Ship.Doc.No	Salesrep	Customer P.O.#	Shipped Via	F.O.B.	Freight Terms		Inv. No.	Ship Date
01	93	16709	T S T		COLLECT			11.05.12

Ln# Location Ord B/O Ship Sku Product Code

Description U/Price

DELIVERIES TO BE DONE BEFORE
4:00 PM , ADVISE SHIPPING CO.

001 31 31 0 SHT 40610813
32 32

KYDEX 6185 - P3 - STEEL GREY- 52068
.080 X 52 X 96

003 1 0 1 HA 0000005

THANK YOU FOR SELECTING
SABIC POLYMERSHAPES

Quoted Dart both qty's
they will take one or the other

P44/18

LINE No.	RECEIVING No.	PICKED BY	DATE	SHIPPED BY	DATE	VERIFIED	DATE
					11/5/12		

NO GOODS TO BE RETURNED WITHOUT APPROVAL FROM SABIC. ALL DISCREPANCIES MUST BE REPORTED WITHIN 10 DAYS.
ALL RETURNS MUST HAVE VALID RETURNED GOODS AUTHORIZATION NUMBER CLEARLY MARKED ON ALL PACKAGES.

CERTIFICATE OF COMPLIANCE

SOLD TO: Dart Aerospace.

DATE: May 11, 2012

YOUR PURCHASE ORDER: 16709

SABIC INVOICE NO: O101086

SABIC SALES ORDER NO: O01101

SABIC POLYMERSHAPES LINE ITEM # 001

QUANTITY: Thirty-Two (32) Sheets

DESCRIPTION: Kydex 6185 - P3 - Steel Grey - 52068

The Kydex 6185 sheets on the above noted C of C were manufactured in accordance with FAR 25.853.

AUTHORIZED REPRESENTATIVE SIGNATURE _____

Wade Dixon

Wade Dixon

1250 Old Innes Road
Unit 519
Ottawa, Ontario
K1B 5L3

T: 613-745-7043
F: 613-745-4291
E: wade.dixon@sabic-ip.com
www.sabic-ip.com



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO16709**

Purchase Order Date 4/13/12

PO Print Date 4/13/12

Page Number 1 of 1

Order From :

VC-GEP001

SABIC POLYMERSHAPES
C/O T08722C/U
PO BOX 8722 STN A
TORONTO, ON M5W 3C2
CA

Contact Name

Vendor Phone 800 267 1575

Vendor Fax 613 745 4291

Vendor Account Nbr

Buyer

Chantal Lavoie

Requisition Nbr

Tax Resale Nbr

10127-2607

Terms

Net 30

Currency

CAD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA



Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	MKYD6185S.080-P3-62015	6185 KYDEX .080"	5/07/12 Yes	1,074.66 sf	TST ground	\$8.2716	\$8,889.14

Special Inst:

MATERIAL: KYDER 6185, COLOR
CODE: IVORY 62015
TEXTURE: P-3 VELOUR MATTE
SHEET SIZE: 52" X 96" X 31 SHEET =
1074.6584 SF

1109.322

PO Total:

\$8,889.14

MATERIAL CERTIFICATION
REQ'D UPON DELIVERY

Change Nbr:

Change Date: 4/13/12

No substitution or déviation without
consent.
Certificate of Conformity or Material
Certification required when applicable